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Assessment of Healthy Lifestyle Patterns of Male Adults Attending Fitness Centers in Al Dakhiliyah, Oman

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Abstract

Background: Improvement of the quality of life and reduction of risk of chronic "public health" complications can be possible through the inclusion of "healthy lifestyle patterns". There is a widespread belief that people who participate in sports and fitness club activities will, as a result, lead healthier and more physically active lives than people who do not. The main goal of this study is to assess the healthy lifestyle patterns among male adults in Ad Dakhiliyah, Oman who are attending fitness centers.

Methodology: The study is quantitative descriptive, cross-sectional survey using convenience sample of 92 male adult participants attending fitness centers in 5 different municipalities of the Ad Dakhiliyah region, Oman. Data collection was done using survey questionnaire that assessed health lifestyle patterns. Ethical approval was obtained from the Research and Human Ethics Review Committee of the University of Nizwa through the Office of Research and Graduate Studies of the College of Health Sciences.

Results: The overall healthy lifestyle patterns for the total sample of male adults attending fitness centers in 5 municipalities of Ad Dakhiliyah region of Oman indicated good health practices, with room for improvement in all the areas of health behavior. The male adults attending fitness centers indicated good health practices in the areas of smoking, alcohol and drugs, eating habits, exercise/fitness, stress control and safety & health. A statistically significant difference in healthstyle pattern in the area of exercise/fitness between the types of fitness center membership was found (p<.05), that fitness center regular membership is related to healthy lifestyle behaviors of exercise/fitness.

Conclusion and Recommendation: Male adults attending fitness centers in 5 municipalities of Ad Dakhiliyah region of Oman revealed good level of healthy lifestyle patterns. Although the overall healthstyle pattern is good, there is still areas of improvement. A counselling program could be designed for male adults attending fitness centers. Therefore, results of the study can pose a challenge on fitness centers to help male adults achieve lifestyle change thereby successfully functioning as health-promoting settings in different communities of Ad Dakhiliyah region, Oman.

Keywords: Healthy lifestyle, Fitness center membership, Healthstyle patterns, Male adults, Ad Dakhiliyah, Oman

Introduction

Improvement of the quality of life and reduction of risk of chronic "public health" complications can be possible through the inclusion of "healthy lifestyle patterns". However, the likelihood of the "illness or premature death" can be managed through attending fitness which can be examined through primary data analysis. This lifestyle is considered by health experts to be one of the most important factors influencing our health. (Bobroff, 2015; World Health Organization, Regional Office for Europe, 1999) [5, 15].

There is a widespread belief that people who participate in sports and fitness club activities will, as a result, lead healthier and more physically active lives than people who do not. Research results on these matters are, however, conflicting (Kokko, Selänne, Alanko *et al.*, 2015) [8]. Also, sports and fitness clubs are regarded as new setting for health promotion, which until now has been inadequately assessed (Kokko, Kannas and Villberg, 2006) [7].

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Fitness center membership is associated with increased health responsibility and health promoting lifestyle (Ready, Naimark, Tate, and Boreskie, 2005) [12], but the research is limited. A gap in the maintenance of a "healthy lifestyle" negatively impacts the rise of problems such as "metabolic diseases, joint and skeletal problems, cardiovascular diseases, hypertension, and overweight" (Park *et al*., 2020) [10].

The main goal of this study is to assess the healthy lifestyle patterns among male adults in Ad Dakhiliyah, Oman who are attending fitness centers.

Methodology
Study Design. The study utilized quantitative descriptive cross-sectional design. Setting. The study was conducted in Oman specifically in five different male fitness centers located in each municipality of Nizwa, Bahla, Samail, Manah, and AlHamra. Population and Sampling. The study population included adults who are attending male fitness centers. Convenience sampling was used to select samples from the population. Inclusion criteria include adult clients attending fitness center, male, attending the fitness center on regular or non-regular basis and are willing to participate in the study. Research Tool and Pilot Testing. The collection of data was done through self-administered survey questionnaire. The questionnaire consists of two parts: Part A: Demographic data of the participants and Part B: Health Style: A Self-Test by Linda B. Bobroff (2015) [5]. This questionnaire assessed the lifestyle patterns of the sample. It is made up of 23 questions on a three-point Likert scale ranging from 0 (almost never) to 2 (Almost always). The health behavior questions evaluated a range of factors that impact an individual's health, including eating habits, exercise/fitness, stress management, alcohol and drug use, and cigarette smoking. Each area of the scale can have a maximum score of 10. The questionnaire was then given to 5 male adults for the purpose of pilot testing to check the face validity of the questionnaire. Reliability of the questionnaire was reported as alpha coefficient and internal consistency for the total scale was.943; (Linda B. Bobroff, 2015) [5]. In this study, the reliability score for the Health Style Self-test is.76 Cronbach's Alpha which is acceptable. Data Collection Procedure and Ethical Perspectives. The proposal was approved by the School of Nursing Graduation Project Committee, ethical approval was obtained from the Research and Human Ethics Review Committee of the University of Nizwa through the Research Committee of the College of Health Sciences. Data Analysis and Presentation. Collected data from the male adults attending the fitness centers were analyzed using the Statistical Package for Social Sciences (SPSS) software (IBM SPSS Statistics 20.0). Descriptive statistics was used to determine the percentage and mean distribution of the demographic variables and the health style behaviors of the participants. The Mann-Whitney U Test was used to compare the mean scores of the health style patterns between regular and non-regular membership in the fitness center.

Results and Discussion
Sociodemographic Characteristics of the Participants
Table 1 shows the frequency and percent distribution of the sociodemographic characteristics of the participants. Majority of the participants belong to the age range 24-29 years of age (43.5%). In terms of Education level, 37% are Bachelor graduates while 35.9% are diploma graduates. Majority of the participants (76.21%) are employed and most of the participants are attending fitness center in Nizwa. In terms of membership, 51.1% are regular members while 48.9% are non-regular members.

Table 1: Frequency and Percent Distribution of the Sociodemographic Characteristics of the Participants (N=92).

Sociodemographic Characteristics		Frequency (f)	Percent (%)
Age Range	18-23 yrs	15	16.3
	24-29 yrs	40	43.5
	30-35 yrs	37	40.2
Education Level	Elementary	3	3.3
	Secondary	17	18.5
	Diploma	33	35.9
	Bachelor	34	37.0
	Master	5	5.4
Employment Status	Employed	70	76.1
	Unemployed	22	23.9
Fitness Center Location	Nizwa	25	27.2
	Bahla	17	18.5
	Samail	19	20.7
	Manah	16	17.4
	AlHamra	15	16.3
Fitness Center Membership	Regular	47	51.1
	Non-regular	45	48.9

Level of Healthy lifestyle Patterns among Adults Attending Fitness Centers
The mean scores for the total sample of adults attending fitness centers in Ad Dakhiliyah region of Oman are shown in Table 2. Percentages for each healthy lifestyle behavior for the total sample of adults attending fitness centers in Ad Dakhiliyah region of Oman are shown in Table 3.
As shown in Table 2, the overall healthy lifestyle mean score for the total sample of adults attending fitness centers in Ad Dakhiliyah region of Oman was M=6.858 (SD=2.94) indicating good health practices, with room for improvement in all the areas of health behavior.

Table 2: Mean (SD) Distribution for the Total Sample in Each Health Style Behavior (N=92)

Healthstyle Behavior Patterns	N	Mean	Std. Dev	Health Practices in this Area
Smoking	92	6.02	4.41	Good
Alcohol and Drugs	92	6.94	3.67	Good
Eating Habits	92	6.73	2.64	Good
Exercise/Fitness	92	6.43	2.69	Good
Stress Control	92	7.35	2.15	Good
Safety and Health	92	7.65	2.10	Good
Overall Mean Score	92	6.85	2.94	Good

Table 3: Frequency and Percentage Distribution of the Level of Healthy Lifestyle Behavior Patterns in the Sample (N=92)

Health style Behavior Patterns	Performance for Each Lifestyle Patterns			
	Excellent (9-10)	Good (6-8)	Health Risk Apparent (3-5)	Serious Risks (0-2)
Smoking	50 (54.3%)	-	-	42 (45.7%)
Alcohol & Drugs	53 (57.6%)	8 (8.7%)	10 (10.7%)	21 (22.8%)
Eating Habits	28 (30.4%)	33 (35.7%)	28 (30.4%)	4 (4.3%)
Exercise/ Fitness	25 (27.2%)	29 (31,5%)	34 (36.9%)	4 (4.3%)
Stress Control	30 (32.6%)	43 (46.7%)	16 (17.4%)	3 (3.3%)
Safety & Health	38 (41.3%)	39 (42.4%)	14 (15.2%)	1 (1.1%)

Smoking

The mean score for the total sample of adults attending fitness centers in Ad Dakhiliyah region of Oman on *smoking behavior* was M=6.021 (SD=4.41) indicating that health practices in this area are good, Fifty (54.3%) of the participants had scores from 9-10 indicating that they never smoked while 42 (45.7%) had scores from 0-2 indicating that they may be taking serious risks with their health and perhaps were not aware of the risks and what to do about them (Table 2 and 3).

Alcohol and Drug Use

The mean score for the total sample of adults attending fitness centers in Ad Dakhiliyah region of Oman on *alcohol and drug use* was M=6.945 (SD=3.67) indicating that health practices in this area are good. Fifty-three (57.6%) of the participants had scores from 9-10 indicating that they are avoiding drinking alcohol or they drink no more than two times a day. While 8 (8.7%) had scores from 6-8 indicating that their health practices in this area are good, but there is room for improvement, 10 (10.7%) had scores from 3-5 indicating that their health risks are showing and would likely need more information about the risks they are facing, 21 (2.8%) had scores from 0-2 indicating that they may be taking serious risks with their health and perhaps were not aware of the risks and what to do about them (Table 2 & 3).

Eating Habits

The mean score for the total sample of adults attending fitness centers in Ad Dakhiliyah region of Oman on *eating habits* was M=6.739 (SD=2.64) indicating that health practices in this area are good. Twenty-eight (29.3%) of the participants had scores from 9-10 indicating that they have healthy eating habits, while 33 (35.8%) had scores from 6-8 indicating that their health practices in this area are good, but there is room for improvement, 28 (30.4%) had scores from 3-5 indicating that their health risks are showing and would likely need more information about the risks they are facing, 4 (4.4%) had scores from 0-2 indicating that they may be taking serious risks with their health and perhaps were not aware of the risks and what to do about them (Table 2 & 3).

Exercise and Fitness

The mean score for the total sample of adults attending fitness centers in Ad Dakhiliyah region of Oman on *exercise and fitness* was M=6.434 (SD=2.69) indicating that health practices in this area are good. Twenty-five (27.2%) of the participants had scores from 9-10 indicating that they are doing vigorous exercises for 30 minutes a day at least 5 times a week, while 29 (31.5%) had scores from 6-8 indicating that their health practices in this area are good, but there is room for improvement, 34 (36.9%) had scores from 3-5 indicating that their health risks are showing and would likely need more information about the risks they are facing, 4 (4.4%) had scores from 0-2 indicating that they may be taking serious risks with their health and perhaps were not aware of the risks and what to do about them (Table 2 & 3).

Stress Control

The mean score for the total sample of adults attending fitness centers in Ad Dakhiliyah region of Oman on *stress control* was M=7.358 (SD=2.15) indicating that health practices in this area are good. Thirty (32.6%) of the participants had scores from 9-10 indicating that they have ether job, school or do work they enjoy so they excellent in stress control, while 43 (46.8%) had scores from 6-8 indicating that their health practices in this area are good, but there is room for improvement, 16 (17.4%) had scores from 3-5 indicating that their health risks are showing and would likely need more information about the risks they are facing, 3 (3.3%) had scores from 0-2 indicating that they may be taking serious risks with their health and perhaps were not aware of the risks and what to do about them (Table 2 & 3).

Safety and Health

The mean score for the total sample of adults attending fitness centers in Ad Dakhiliyah region of Oman on *safety and health* was M=7.652 (SD=2.10) indicating that health practices in this area are good. Thirty-eight (41.3%) of the participants had scores from 9-10 indicating that they have safety and are health conscious at home and work, while 39 (42.5%) had scores from 6-8 indicating that their health practices in this area are good, but there is room for improvement, 14 (15.3%) had scores from 3-5 indicating that their health risks are showing and would likely need more information about the risks they are facing, 1(1.1%) had scores from 0-2 indicating that they may be taking serious risks with their health and perhaps were not aware of the risks and what to do about them (Table 2 & 3).

Differences in the Healthy Lifestyle Patterns Between Male Adults who are Regular and Non-regular Members of Fitness Centers

Table 4: Mann-Whitney U Test to Determine Differences in Healthstyle Score Between Regular and Non-Regular Membership in a Fitness Center

Healthstyle Behaviors	Fitness Center Membership	N	Mean Rank	U	Sig.
Smoking	Regular	47	46.65	1050.5	.952
	Non-regular	45	46.34		
Alcohol and Drugs	Regular	47	46.49	1057.0	.997
	Non-regular	45	46.51		
Eating Habits	Regular	47	50.71	859.5	.116
	Non-regular	45	42.10		
Exercise/ Fitness	Regular	47	59.20	460.5	.000*
	Non-regular	45	33.23		
Stress Control	Regular	47	50.09	889.0	.182
	Non-regular	45	42.76		
Safety and Health	Regular	47	49.31	925.5	.294
	Non-regular	45	43.57		
*Significant at .001 level					

A Mann-Whitney U test was run to determine differences in healthy lifestyle behaviors score between regular and non-regular membership in a fitness center. As shown in Table 4, a Mann-Whitney U test showed that there was a statistically significant difference in healthy lifestyle score of Exercise/Fitness between the types of fitness center membership, U= 460.5, p = 0.000, with a mean rank health style score of 59.20 for Regular membership and 33.23 for Non-regular membership. Exercise/ fitness score in the regular membership group was statistically significantly higher than the non-regular membership group. Table 4 also shows that there is no significant difference between regular and non-regular membership groups in the healthy lifestyle scores of smoking, alcohol and drugs, eating habits, stress control and safety and health (p>0.05).

Discussion
The current study aimed at determining the level of healthy lifestyle patterns among male adults attending fitness centers in Ad Dakhiliyah governorate. A look at the results show that the overall health style patterns mean score for the total sample of adults attending fitness centers in Ad Dakhiliyah was M=6.858 (SD=2.947) indicating good health practices. This result is supported by the results of the study of Anand and Marwaha (2016) [3], where the mean score for lifestyle patterns in their study indicated that current health practices of their sample are good yet there is scope for improvement. The high score according to their study could be due to the increasing awareness about lifestyle patterns and their effect on health. The study of Adderly-Kelly and Green (2000) [2] showed good to excellent healthstyle patterns in areas of smoking, alcohol and drugs, eating habits, exercise/fitness, stress control and safety & health.
The results of the current study confirm that safety and health are important to reduce the risks associated with passive lifestyles. According to Abbaasi *et al*. (2020) [1], self-efficacy can reduce the risks of having diseases such as diabetes as the patient's ability to manage activities such as eating, drinking and doing sports can reduce the passive impacts of diabetes. Safety and health are related to each other. This is confirmed by studies such as that of Anand and Marwaha (2016) [3], where cigarette smoking is one of the main causes of having diseases such as diabetes and high blood pressure and heart diseases as examples. Another risk that is associated with safety and health according to Anand and Marwaha (2016) [3], is taking drugs and drinking alcoholic drinks as such stuff can endanger lives of people

due to the changes they leave on the nervous system and on liver, they can also cause serious results such as having accidents and health problems.
The results of studies also show that eating habits can lead to passive health problems such as heart diseases, obesity, diabetes and may cause cancer. People need to realize and understand the healthy life styles such as reducing consumption of sugar and fats, eating whole grain bread and drinking fresh water and juices, they should be aware of the importance of reducing consumption of junk foods and fizzy drinks as they contain many big amounts of sugar and fats. Practices such as stress and alcohol consumption may lead to death and other health problems. This issue can be resolved if there is enough awareness of risks associated with unsafe activities such as stress as it can cause severe health problems such as abdomen and colonic diseases (Warner and Schwarzer, 2020) [14].
Moreover, the results of the study showed that participants need more information about safety and health as although a good number of them have information about healthy food and exercise, there are still risks they need to have information about. According to Bieyabanie and Mirghafourvand (2020) [4], having information about healthy lifestyles can improve the self-efficacy as people can learn about different healthy activities they can do and maintain good long term health such as having information about diseases such as breast cancer, diabetes and problems associating high blood pressure; health promoting lifestyles can include receiving interventional attempts that raise people's awareness about self-efficacy and healthy lifestyles and focus on protection from diseases.
In the current study, a statistically significant difference in healthy lifestyle score of Exercise/Fitness between the types of fitness center membership was found. Exercise/ fitness score in the regular membership group was statistically significantly higher than the non-regular membership group. This result is supported by the study of Ready, Naimark, Tate, & Boreskie (2005) [12] whereby fitness center membership is related to healthy behaviors and concluded that fitness center members were more likely than the non-member group to score higher on physical fitness.
Results also show that there is no significant difference between regular and non-regular membership groups in the healthy lifestyle scores of smoking, alcohol and drugs, eating habits, stress control and safety and health. Although this may be true in the current study, other studies such as that of Marta *et al*. (2022) [9] provides different results as their study stated that regular physical activity can bring

better health levels on the long term as this can be clear on the influence of the sport activities on the neuroendocrine system and that people who are regular in doing sport activities prove to have less stress levels than others. This was also confirmed by Tu *et al*. (2022) [13] who added that regular physical activities can prevent risk factors in young people and this also depends on choosing the types of exercises that can help in reducing risk factors amongst young people, This confirms that participants of the current study need to consider having regular sport practice to see its good results on their health on the long run and maintain better health and reduce risk factors in the future.

Conclusions

The overall healthy lifestyle patterns for the total sample of adults attending fitness centers in Ad Dakhiliyah region of Oman indicated good health practices, with room for improvement in all the areas of health behavior.

A statistically significant difference in healthy lifestyle pattern in the area of exercise/fitness between the types of fitness center membership was found, that fitness center membership is related to healthstyle behaviors of exercise/fitness. Participants can improve their healthy lifestyle behaviors by being regular in having exercises.

Study findings have implications for the health promotion activities of adult males attending fitness centers in Oman. Early identification of at-risk behaviors among the male adults can contribute to development and implementation of health style behavior programs. The study can pose a challenge on fitness centers to help male adults achieve lifestyle change thereby successfully functioning as health-promoting settings in different communities of the Ad Dakhiliyah region of Oman.

Acknowledgments

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